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03/10/2004

James C. Wray 1493 Chain Bridge Road Suite 300 McLean, VA 22101



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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/839,661	04/23/2001	Shinya Sasamoto	167PMKG.01	9871

TITLE OF INVENTION: SHEET POST PROCESSING APPARATUS

APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	)	\$300	\$1630	06/10/2004
EXAM	INER .	ART UN	IT	CLASS-SUBCLASS		
DEUBLE	, MARK A	3651		271-003030	_	
CFR 1.363).  Change of corresponde Address form PTO/SB/1.  "Fee Address" indicati	e address or indication of "F ence address (or Change of 0 22) attached. ion (or "Fee Address" Indica or more recent) attached. Us	Correspondence	names of agents Ol firm (hav agent) an	nting on the patent front particle of the patent front particle of the patent of the p	t attorneys or 1 James ne of a single ed attorney or gistered patent	Creighton Wra
PLEASE NOTE: Unless	ed to the USPTO or is being : EE	low, no assignee de submitted under sep	ata will appe parate cover. ) RESIDENO	ar on the natent Inclusion o	,	iate when an assignment ha signment.
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Ma Issue Fee		•	A check i	n the amount of the fee(s) is	enclosed.	
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Advance Order - # of	Copies 10		☐ The Dire Deposit Acc	ctor is hereby authorized by	y charge the required fee(s), or (enclose an extra	credit any overpayment, t

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2004

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Melaranin		06/09/

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## 06/10/2004 WABRHAM2 00000088 09839661

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03	FC:8001	30.00	OP

PTO/SB/17 (10-03)
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## RANSMITTAL for FY 2004

(\$) 1,660.00

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

Complete if Known		
Application Number	09/839,661	
Filing Date	04/23/2001	
First Named Inventor	Shinya Sasamoto	
Examiner Name	M. Deuble	
Art Unit	3651	
Attorney Docket No	167PMKG.01	

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)			
X Check Credit card Money Other None	3. ADDITIONAL FEES			
Deposit Account:	Large Entity , Small Entity			
Deposit Account.	Fee Fee Fee Fee Fee Description Code (\$) Code (\$)	Fee Paid_		
Account Number	1051 130 2051 65 Surcharge - late filing fee or oath			
Deposit Account	1052 50 2052 25 Surcharge - late provisional filing fee or cover sheet			
Name	1053 130 1053 130 Non-English specification			
The Director is authorized to: (check all that apply)	1812 2,520 1812 2,520 For filing a request for ex parte reexaming	nation		
Charge fee(s) indicated below Credit any overpayments  Charge any additional fee(s) or any underpayment of fee(s)	1804 920* 1804 920* Requesting publication of SIR prior to Examiner action			
Charge fee(s) indicated below, except for the filing fee	1805 1,840* 1805 1,840* Requesting publication of SIR after			
to the above-identified deposit account.	Examiner action			
FEE CALCULATION	1251 110 2251 55 Extension for reply within first month	.		
1. BASIC FILING FEE	1252 420 2252 210 Extension for reply within second month	'		
Large Entity Small Entity	1253 950 2253 475 Extension for reply within third month	<del> 1</del>		
Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1254 1,480 2254 740 Extension for reply within fourth month			
1001 770 2001 385 Utility filing fee	1255 2,010 2255 1,005 Extension for reply within fifth month			
1002 340 2002 170 Design filing fee	1401 330 2401 165 Notice of Appeal			
1003 530 2003 265 Plant filing fee	1402 330 2402 165 Filing a brief in support of an appeal	<b> </b>		
1004 770 2004 385 Reissue filing fee	1403 290 2403 145 Request for oral hearing			
1005 160 2005 80 Provisional filing fee	1451 1,510 1451 1,510 Petition to institute a public use proceed	ling		
SUBTOTAL (1) (\$)	1452 110 2452 55 Petition to revive - unavoidable			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1453 1,330 2453 665 Petition to revive - unintentional	1,330		
Fee from	1501 1,330 2501 665 Utility issue fee (or reissue) 1502 480 2502 240 Design issue fee	1.,550		
Total Claims	1502 460 2502 240 Design issue fee			
Independent 3** - X	1460 130 1460 130 Petitions to the Commissioner			
Claims Multiple Dependent	1807 50 1807 50 Processing fee under 37 CFR 1.17(q)			
Large Entity   Small Entity	1806 180 1806 180 Submission of Information Disclosure S	itmt		
Fee Fee Fee Fee Fee Description Code (\$) Code (\$)	8021 40 8021 40 Recording each patent assignment per property (times number of properties)			
1202 18 2202 9 Claims in excess of 20	1809 770 2809 385 Filing a submission after final rejection			
1201 86 2201 43 Independent claims in excess of 3	(37 ČFR 1.129(a))			
1203 290 2203 145 Multiple dependent claim, if not paid	1810 770 2810 385 For each additional invention to be examined (37 CFR 1.129(b))			
1204 86 2204 43 ** Reissue independent claims over original patent	1801 770 2801 385 Request for Continued Examination (F	RCE)		
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802 900 1802 900 Request for expedited examination of a design application			
	Other fee (specify) Fee Codes 1504 & 8001	330		
SUBTOTAL (2) (\$)		1,660.00		
**or number previously paid, if greater: For Reissues, see above	(Complete /# engiretrie			

SUBMITTED BY (703) 442-4800 Registration No. 40,252 Telephone Meera P. Narasimhaba Name (Print/Type) (Attorney/Agent) 06/09/2004 orani Signature

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